

**2004
AOG REQUEST FOR FUNDS (RFF) - 9235**

STATE OF UTAH -CDBG PROGRAM
324 SOUTH STATE STREET, SUITE 500
SALT LAKE CITY, UTAH 84111

(801) 538-8861

REQUEST #:

Date of Request:

SECTION I - GRANTEE INFORMATION

1. GRANTEE NAME AND ADDRESS:

2. CONTRACT #:

3. CONTRACT AMOUNT \$

4. DATE OF THIS REPORTING PERIOD:

FROM:

TO:

5. ACCOMPLISHMENT NARRATIVE:

SECTION II - EXPENDITURES OF CDBG FUNDS ONLY – ROUND ALL FIGURES TO THE NEAREST DOLLAR

| BUDGET CATEGORY | COLUMN 1 | COLUMN 2 | COLUMN 3 | COLUMN 4 | COLUMN 5 |
|----------------------|-----------------|---|------------------------|----------------|-------------------|
| ADMINISTRATION | CONTRACT BUDGET | EXPENSES INCURRED THIS REPORTING PERIOD | ALL PRIOR EXPENDITURES | TOTAL EXPENSES | BALANCE AVAILABLE |
| SALARIES | | | | | |
| OFFICE SUPPLIES | | | | | |
| TRAVEL | | | | | |
| OTHER (IDENTIFY) | | | | | |
| PLANNING | | | | | |
| SALARIES | | | | | |
| SUPPLIES/EQUIPMENT | | | | | |
| TRAVEL | | | | | |
| OTHER (IDENTIFY) | | | | | |
| TECHNICAL ASSISTANCE | | | | | |
| SALARIES | | | | | |
| SUPPLIES/EQUIPMENT | | | | | |
| TRAVEL | | | | | |
| OTHER (IDENTIFY) | | | | | |
| FINAL TOTALS | \$ | \$ | \$ | \$ | \$ |

SECTION III - GRANTEE TO COMPLETE ITEM 6 ONLY

6. THIS REQUEST IS A **REIMBURSEMENT** FOR \$_____ IN EXPENSES INCURRED.

SIGNATURE OF PROJECT MANAGER OR ELECTED OFFICIAL

(For State Use Only)PROGRAM SPECIALIST:

DATE:

VENDOR #:

(For State Use Only)DIVISION ACCOUNTANT:

DATE:

Hud Project #

Hud Activity #

(For State Use Only)ORG#/APPR UNIT/RPT CAT:

ACCOUNT CODE:

DEPARTMENT #:

SECTION I - GRANTEE TO COMPLETE FRONT SIDE AS INSTRUCTED BELOW

- 1. Name and official mailing address of Grantee. (include sub-grantee if applicable)**
- 2. CDBG Contract Number: (6 digits)**
- 3. Amount of CDBG Contract ONLY**
- 4. Enter the period of time these expenses cover. (Usually 1 month)**
- 5. Provide a brief narrative description of the project's progress/accomplishments or status since the previous RFF was submitted.**

SECTION II- GRANTEE TO COMPLETE FRONT SIDE AS INSTRUCTED BELOW

| | |
|---|--|
| COLUMN 1: Contract Budget | Insert the figures from the budget page, Attachment D, of the contract. The figures in this column should not be changed <u>without a contract amendment</u>. |
| COLUMN 2: Expenses incurred this | Indicate the total expenses for each category, during the period being reported. |
| COLUMN 3: All prior expenditures | Enter the cumulative amounts spent in each category (Get this information from the most recent RFF). |
| COLUMN 4: Total Expenses | Add Columns 2 and 3 and enter the total in column 4. |
| COLUMN 5: Balance Available | Subtract Column 4 from Column 1. |

SECTION III - GRANTEE TO COMPLETE FRONT SIDE AS INSTRUCTED BELOW

- 6. ENTER THE AMOUNT OF EXPENSES INCURRED DURING REPORTING PERIOD.**
- THE TOTAL AMOUNT OF ITEM 6 MUST EQUAL THE FINAL TOTAL OF COLUMN 2, EXPENSES INCURRED THIS REPORTING PERIOD. ATTACH APPLICABLE DOCUMENTATION.**